

PROGRESS
OF
MEDICAL SCIENCE

MEDICINE

UNDER THE CHARGE OF

W. S. THAYER, M.D.,

PROFESSOR OF CLINICAL MEDICINE, JOHNS HOPKINS UNIVERSITY, BALTIMORE, MARYLAND,

AND

ROGER S. MORRIS, M.D.,

ASSOCIATE PROFESSOR OF MEDICINE, WASHINGTON UNIVERSITY, ST. LOUIS, MISSOURI.

Human Infection with *Ascaris Mystax*.—BRISELE (*Münch. med. Woch.*, 1911, lviii, 2391) reports a case of human infection with *Ascaris mystax*, the common round worm of the dog and cat. He has found records of only 10 similar cases. The patient was a child, aged two years. During an attack of measles, 15 worms were expelled spontaneously and were found in the bed. Calomel and santonin were administered, and 62 more worms of the same species, together with hundreds of *Oxyuris vermicularis*, were expelled. It is of interest, as showing the probable source of infection, that two cats and a dog belonging to the family were found to be infected with *Ascaris mystax*; following treatment of the animals, enormous masses of this parasite were obtained.

Rigidity of Certain Back Muscles as a Sign of Pleurisy and the Frequency of Serofibrinous Pleuritis.—FELIX RAMOND (*Bull. et mém. Soc. méd. d. hôp. de Paris*, 1912, No. 4, 134) finds that if the back of a normal individual in the upright position be examined, in the lumbar region under the twelfth rib on either side of the median line is found a prominence averaging two finger breadths, due to the illeocostal and long dorsal muscles. In patients with pleurisy, this mass contracts reflexly to immobilize the inflamed pleura below, just as abdominal muscles contract in peritonitis, the muscles of the neck and spine in meningitis, or the peri-articular muscles in arthritis. Ramond believes that this phenomenon constitutes a valuable sign in pleurisy. On inspection, the muscles seem prominent. On palpation, they feel harder than normally, and do not relax with change to a lateral position. This

occurs in all pleuritis, appearing before any other sign, persisting after the disappearance of effusion, thus possibly helping to diagnose what has preceded. If it is found bilaterally, it implies bilateral inflammation, especially if combined with dulness. Rigidity of these muscles may, however, occur in cases of intercostal neuralgia, sciatica, pains in the spine, or lordosis. But, on the whole, having eliminated such reflex spinal contractions, the sign in obscure cases draws attention to the possibility of pleural inflammation, and thanks to it, Raymond has been able to diagnose many pleuritis otherwise unappreciable, from which he considers this lesion probably the most frequent intrathoracic inflammation.

Experimental Pneumonia by Intrabronchial Insufflation.—R. V. LAMAR and S. J. MELTZER (*Jour. Exper. Med.*, 1912, xv, No. 2, 133), in 42 of 48 dogs not selected or prepared in any manner, have produced lobar pneumonia by injecting pneumococci of exalted virulence into the lungs through a catheter or stomach tube by insufflation. Control animals were all negative. Apparently in accordance with the quantity of culture injected the disease was mild, severe, or fatal. Clinically, the disease was characterized by fever and malaise subsiding in a few days without crisis. Pathologically the transition from red to gray hepatization was wanting. Otherwise the anatomical and bacteriological findings agreed with those in man in fibrinous pneumonia. Consolidation occurred quickly. Seven hours after injection nearly complete consolidation of the greater part of one lobe was present. The exudate consisted mainly of well preserved leukocytes, a few red corpuscles, and fibrin. Pneumococci were seen in large numbers. Phagocytes were not numerous. The lymph nodes related to the consolidation were swollen, soft, and moist. By the fourth day resolution was fairly inaugurated, proceeding rapidly but not uniformly. By two weeks the lungs were nearly always normal. In several instances, however, resolution was not complete, and in 2, organization was extensive, though more or less dependent on secondary invasion. In fatal cases one lobe, and sometimes two or three were consolidated. The pleura contained large quantities of blood and fibrinopurulent exudate; there was pericarditis and septicemia. This is the first unmistakable experimental evidence of intimate etiological relationship between pneumococcus and lobar pneumonia. It probably is due to the fact that the injected quantity was sufficient to obliterate a group of bronchi, and thus convert their lumina and corresponding alveoli into closed cavities containing pneumococci in the proximity to lung tissue. In other words, Lamar and Meltzer conclude that the question of experimental success does not depend so much on the alteration of the power of resistance of the invaded individual as upon the opportunity offered to organism for intrenchment in invaded territory.

Indiscriminate Drug Taking.—ALEXANDER LAMBERT (*New York Med. Jour.*, 1912, xiv, No. 7, 313) finds that the danger of forming the habit of continually turning to some drug at the slightest pain in the endeavor to numb it, instead of finding out what causes it to arise, is in reality very great. For example, many people take headache powders